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08/23/2004

DINSMORE & SHOHL LLP
1900 CHEMED CENTER
255 EAST FIFTH STREET
CINCINNATI, OH 45202

09/28/2004 FFANAIA3 00000005 09356926

01 FC:1501 1330.00 OP
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Stephanie Berlepsch	(Depositor's name)
<i>Stephanie Berlepsch</i>	(Signature)
September 23, 2004	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/356,926	07/19/1999	WIM J. VAN OOIJ	19789-008	8477

TITLE OF INVENTION: SILANE COATINGS FOR METAL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	11/23/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
LAVILLA, MICHAEL E	1775	427-387000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Dinsmore & Shohl LLP

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The University of Cincinnati

Cincinnati, Ohio

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☒ Publication Fee (No small entity discount permitted)
- ☐ Advance Order - # of Copies _____

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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- ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number _____ (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is not claiming SMALL ENTITY status. See, e.g., 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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(Authorized Signature) Geoffrey L. Oberhaus (Date)

9-23-2004

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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Docket No.: 19789-8

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Stephanie Berlepsch
Stephanie Berlepsch

PATENT

NOA Date: August 23, 2004

IN THE UNITED STATES PATENT & TRADEMARK OFFICE

Applicant: Wim J. van Ooij et al.

Paper No.:

Serial No.: 09/356,926

Group Art Unit: 1775

Filed: July 19, 1999

Examiner: Michael E. LaVilla

For: **Silane Coatings For Metal**

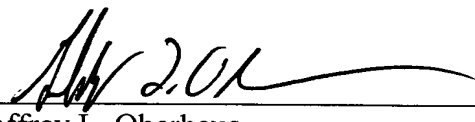
TRANSMITTAL OF ISSUE FEE PAYMENT

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Dear Sir:

Attached please find the Fee Transmittal form (PTOL-85) as well as credit card form PTO-2038 in the amount of \$1,630.00 for payment of the issue and publication fees in the above-referenced application. Please charge any additional fees required, and credit any overpayment, to Deposit Account No. 04-1133.

Respectfully submitted,

By: 
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